

NAB Form PB-18 Candidates

## AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☒ **FEDERAL CANDIDATE**☐ **STATE/LOCAL CANDIDATE**

**To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3**

**Station and Location:****Date:** 7.27.16I, Laura Lancasterbeing/on behalf of: Tim Walberga legally qualified candidate of the Republicanpolitical party for the office of: MI CD07in the Primaryelection to be held on: August 2, 2016

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

**Attach proposed schedule with charges (if available): SEE ORDER**

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I represent that the payment for the above described broadcast time has been furnished by:

Walberg for Congress, Inc. PO Box 1362, Jackson, MI 49204-1362

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

**Jeffrey Yeutter**

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).

**THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.**

**To Be Signed By Candidate or Authorized Committee**

7.27.16

Date \_\_\_\_\_

Laura Lancaster

**Signature**

**To Be Signed By Station Representative**

**Accepted**

**☐ Accepted in Part**

☐ **Rejected**

**Signature**

Printed Name \_\_\_\_\_

# Title

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**FEDERAL CANDIDATE CERTIFICATION**

**In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification Is Required:**

I, Laura Lancaster

(name of federal candidate or authorized committee) hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

☐ **does**☒ **does not**

refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:

(check applicable box)

☐ the radio programming contains a personal audio statement by the candidate that identifies the candidate, the office being sought, and that the candidate has approved the broadcast.

☐ the television programming contains a clearly identifiable photograph or similar image of the candidate for a duration of at least four seconds, and a simultaneously displayed printed statement identifying the candidate, that the candidate approved the broadcast, and that the candidate and/or the candidate's authorized committee paid for the broadcast.



**signature of candidate or authorized committee**

Laura Lancaster

**printed name**

7.27.16

**date**